COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

In re application of: Seriamod: Filed: For: Najla GUTHRIE and Elzbieta Maria KUROWSKA

10/697,563

October 31, 2003

USE OF POLYMETHOXYLATED FLAVONES FOR TREATING INSULIN RESISTANCE

Transmitted herewith is a **Revocation of Power of Attorney with New Power Of Attorney and Change of Correspondence Address** in the above-identified application.

]	Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
]	Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
]	No fee for additional claims is required.
ī	A filing fee for additional claims calculated as shown below, is required:

	(Col. 1) (Col. 2) SMALL ENTITY					LARGE ENTITY
FOR:	REMAINING	HIGHEST		RATE FEE	<u>OR</u>	RATE FEE
<u></u>	AFTER	PREVIOUSLY	PRESENT	_		
	AMENDMENT	PAID FOR	EXTRA	_		
TOTAL CLAIMS	* Minus	** =	0	x \$ 9 \$		x \$ 18 \$
INDEP. CLAIMS	* Minus	*** =	0	x \$ 42  \$ ·		x \$ 84 \$
[ ] FIRST PRES	SENTATION OF	MULTIPLE DE	EP. CLAIM	+ \$140  \$		+ \$280 \$
•						
				TOTAL: 5	5	OR TOTAL: \$

\* If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

"[]	Also transmitted herewith are: [ ] Petition for extension under 37 C.F.R. 1.136 (in duplicate) [ ] Other:
[ ]	Check(s) in the amount of \$.00 is/are attached to cover: [ ] Filing fee for additional claims under 37 C.F.R. 1.16 [ ] Petition fee for extension under 37 C.F.R. 1.136 [ ] Other:

[X] The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.

[X] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.

[X] Any patent application processing fees under 37 C.F.R. 1.17.

Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

Robert J. Paradiso, Reg. No. 41,240 DAVIDSON, DAVIDSON & KAPPEL, LLC 485 Seventh Avenue, 14<sup>th</sup> Floor

awa

Docket No.:<u>476.1019</u>
Date: November 29, 20

New York, New York 10018

Tel: (212) 736-1940 Fax: (212) 736-2427

I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with the United States Postal Service as "first class mail" in an envelope addressed to "Commissioner for Patents, Alexandria, VA 22313-1450" on November 29, 2004

DAVIDSON, DAVIDSON, & KAPPEL, LLC

BY:

PTO/SE/82 (09-04)
Approved for use through 11/30/2005. OMB 0851-0035
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	REVOCATION OF POWER OF	Application Number	10/697,563		
8	ATTORNEY WITH  NEW POWER OF ATTORNEY  AND  CHANGE OF CORRESPONDENCE  ADDRESS	Filing Date	October 31, 2003		
E.		First Named Inventor	Najia GUTHRIE		
D B B		Art Unit	1614		
		Examiner Name	Kevin E. WEDDINGTON		
		Attorney Docket Number	476.1019US		

<u> </u>							
I hereby revok	e all previous p	owers of attorney or authortz	allons of a	gent given in t	ne above-ider	ntified application:	
	of Attorney	is submitted herewith.					
OR							
🔯 I hereby	appoint the	practitioners at Custon	ner Numb	er: 2	3280		
				<u> </u>			
⊠ Please o	hange the c	orrespondence addres	s for the	above-iden	lified applic	ation to:	
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OR							
⊠ Firm <i>or</i> Individua	al Name	Davidson, Davidson	& Kappel	, LLC			
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		14 <sup>th</sup> Floor					
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Country		US					
Telephone		212-736-1940	Fax	ax 212-736-2427			
I am the:							
Applicant/Inventor.							
			See 37	CFR 3.71	\* <u></u>		
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature Perle Atti							
Name	Najla Guth	rie		· · · · · · · · · · · · · · · · · · ·			
Date New 17/01, Telephone 519-438-933					438-9374		
NOTE: Signatu Submit multiple	res of all the inv forms if more t	ventors or assignees of recor han one signature is required	d of the end	tire interest or	their represer	ntative(s) are required.	
Total of 2	forms are subi	mitted.					

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection ing (and by the CSFTO to process) an application. Contreshlamy is governed by as 0.3.0. 122 and at CFK 1.11 and 1.12. This conceders it is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademerk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22319-1450.

OV 17 2444-12 15PM

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Application Number	10/697,563			
Filing Date	October 31, 2003			
First Named Inventor	Najia GUTHRIE			
Art Unit	1614			
Examiner Name	Kevin E. WEDDINGTON			
Attorney Docket Number	476.1019US			

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:							
I		is submitted herewith.					
OR							
I hereby	appoint the	practitioners at Custom	ner Numb	per: 23	3280		
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⊠ Please c	hange the c	correspondence address	s for the	above-ident	ified applic	ation to:	
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I am the:	<del>-</del>						
⊠ Appl	licant/Invento	or.					
-	_	ord of the entire interest.					
State	ement under	37 CFR 3.73(b) is encl	losed. (Fo	orm PTO/SE	3/96)		
SIGNATURE of Applicant or Assignee of Record							
Signature	Signature Uklewustur						
Name	Elzbieta M:	aria Kurowska					
Date	Nou. 1	8,2004	Telepho	one	519-43	38-9374	
NOTE: Signatures of all the inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
*Total of 2 forms are submitted							

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.